PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number
10708197

CLAIMS AS FILED – PART I

(Column 1)	(Column 2)		SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE	RATE	FEE
BASIC FEE (37 CFR 1.16(a))				$385	OR	$____
TOTAL CLAIMS (37 CFR 1.16(c))	41 minus 20 =	* 21	X $9 =	189	OR	X $____ =
INDEPENDENT CLAIMS (37 CFR 1.16(b))	1 minus 3 =	* ———	X $43 =	———	OR	X $____ =
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ $145	145	OR	+ $____ =
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL	719	OR	TOTAL

CLAIMS AS AMENDED – PART II

AMENDMENT A

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	*	Minus **	=	X $____ =		OR	X $____ =	
Independent (37 CFR 1.16(b))	*	Minus ***	=	X $____ =		OR	X $____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ $____ =		OR	+ $____ =	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT B

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	*	Minus **	=	X $____ =		OR	X $____ =	
Independent (37 CFR 1.16(b))	*	Minus ***	=	X $____ =		OR	X $____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ $____ =		OR	+ $____ =	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT C

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	*	Minus **	=	X $____ =		OR	X $____ =	
Independent (37 CFR 1.16(b))	*	Minus ***	=	X $____ =		OR	X $____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ $____ =		OR	+ $____ =	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.